

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth of Massachusetts	TOWN CLERK					k or Election Commission
Fill in Reporting Period	dates: Beginning Date:	1 1,200	Ending		une -	7,2022
Type of Report: (Check 8th day preceding preliminary)	cone) Sth day preceding election	30 day	y after election	year-e	nd report	dissolution
School 116 Tanglew	Dalenty E Full Name (if applicable) Cemmittle De Sought and District Word Dr esidential Address HUS & Gmail Com	E-mail: L	amygo	Committee Commit	HAIM Name WWW ee Treasurer 24 ng Address 12.04	ee Dalenta
	SUMMARY BALAN	CE INFO	RMATION:			
Line 1: End	ding Balance from previous report		Ø			
Line 2: Tot	tal receipts this period (page 3, line 11)	3540	000		
Line 3: Sul	btotal (line 1 plus line 2)		3,540	.00		GUÝ
Line 4: Tot	tal expenditures this period (page 5, li	ne 14)	3118.	93		
Line 5: End	ding Balance (line 3 minus line 4)		4210	07	<u>ardı</u>	
Line 6: Tot	tal in-kind contributions this period (p	age 6)	0		WEN	
Line 7: To	tal (all) outstanding liabilities (page 7))	O			
Line 8: Na	ume of bank(s) used:		7			To wife I
activity, including all contributions,	port including attached schedules and it is, to the be loans, receipts, expenditures, disbursements, in-kind under the authority or on behalf of this committee i	d contributions	and liabilities for the with the requirement	is reporting peri	od and represe 5.	
FOR CANDIDATE FILING	GS ONLY: Affida vit of Candidate: (check 1 b	oox only)		THE STATE OF	V 4 1	
activity, of all persons acting un	his report including attached schedules and it is, to the number the authority or on behalf of this committee in a le any expenditures on my behalf during this reporting	accordance wit	th the requirements of	of M.G.L. c. 55.	I have not rec	
finance activity, including contr	his report including attached schedules and it is, to the ributions, loans, receipts, expenditures, disbursement persons acting under the authority or on behalf of the ributions.	ts, in-kind con his candidate i	ntributions and liabile n accordance with the	ities for this repo	rting period a	nd represents the

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)		
5/8	Mark Sylvia 43 North Way Ny 12804	100.00	Semestic Strapendumes againment is avail sort all expenditures. Please include your comm To Winna Paid		
5/7	Mellssa Geissler Granflinst Charlestum MA	100.00			
517	Emilie Forche 13231 Helotes Circle Helotes TX	35 OV			
5/7	Ashlee vose 17 Cottuge St Putnam CT	100.00			
5h	mana Pakulis Ilis freeman st Brooklyn Ny	50.00			
517	2060D ventura BIVd	10000			
51	James Dalenta Nea middle Haddam R	2 2			
5/7	Sarah Bactwicz, 1.1. 6248 Rushingbrook Dr Rateigh NC	100.00			
5/19	David Mahorey 15 to Sterst Duncy MA	250.00	of band wahoney		
5/19	Christine Saulinier 26 Deer run Terrace EL	25,00			
5117	Juaith Burgeois 2205 Boston Pd	250.00	Pehred		
5/18	Judeph Shea 440 York St Canton ma	100.00			
5/19	Stephen Crucial 28 Country Club pr	250,00	Consultant, Corruscial Group		
ine 9: Total Rece	ipts over \$50 (or listed above)	1124 1 2 1 2			
ine 10: Total Rece	eipts \$50 and under* (not listed above)		Continue		
ine 11: TOTAL l	RECEIPTS IN THE PERIOD	ETROUT A A SE	← Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address		Occupation & Employer		
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)		
	Christopher walker	PL-ST-III-OU			
5/18	83 Drewsim Rel MA	150 DT			
110	Guincy MA	50.02			
61	En'n Chical.	12000	Photographer Erin Chrusciel Photography LLC		
5/15	Enin crucial Dr 28 Country Olub Dr	630.00	Character Dorbana de 1110		
			Chrusciel Molaraphy LLC		
10/11	Mariyn Pichards				
64		50.00			
	The Name of the last of the				
5/27	John Cooper	500.00			
3 10	Meadowbrook Rd EZ	00.09			
, ,	Charles Gray				
6	Marcitre E.C.	100.00	Retired		
	NUICI TIVE E.C.				
Section 1					
11/2					
	Land to the state of the state		d-		
	0.00	0000			
ine 9: Total Rece	ipts over \$50 (or listed above)	2980			
ine 10: Total Rece	eipts \$50 and under* (not listed above)	560			
ine 11: TOTAL I	RECEIPTS IN THE PERIOD	3540	← Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

eport all expend	ditures. Please include your comm	ittee name and a page number o	n each page.)	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
5/4	Apple Place	sumers Rd	Campaign	100.00
5/19	Center Souare Grille	EL	Campaign 1	400.0
69	Centersquare Gnive	Ė	1	254.0
5/13	IMMORAL Graphix	87 Shaker Rd EL	Yard Signs	630.0
5/24			Yard signs	120.00
5 31			banners	160.00
5 7	Minuteman Press	I Anngina br Enfield CT	Postage	262.2
5/17		*	Mariers	735.65
5124	Reminder Publications	PO BOX 21719	Newspaper	360.0
9/17	Vistaprint	online	Postraris	97.00
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	3118.9
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3118,97

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		Paragraph		
			A.1	
		9		
			150	
		Line 18: TOTAL OUTSTAND		

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